2004 FOR DROFIT CORPORATIO

FILED Apr 21, 2004 08:00 AM Secretary of State

ANNU	JAL REPORT	O14	
DOCUMENT # 235964 1. Entity Name FOREST IMPROVEMENT CON			
Principal Place of Business 206 SE 41ST AVENUE OCALA, FL 34471 US	Mailing Address 206 SE 41ST AVENUE OCALA, FL 34471 US		
			0402200
TONOL WH	ITE IN THIS SPA	AUE	4. FEI Nur 59-6
			5. Certific
6. Name and Address of C	Current Registered Agent	I fall to be been all the	

8. The above named entity submits this statement for the purpose of changing its registered office or registere

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			04022004	No Chg-P	CR2E	034 (10/00	3)
J			59-606			·	Applied For Not Applicable
andres erece				of Status Desired		\$8.75 A	dditional red
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d offi	91 10 BO	gistered	agent, or bo	th, in the State of F	Rorida, Lam	tamiliar wit	h, and accept
Agent	ಕ್ರಭಾವಿಕ ಕ	required wh	en reinstating)		DATE		
Agent	signature	\$5.0	en reinstading) 3 May Be to Fees	U000 04/21/0	001218	76 7-001	150.00
	Symme	\$5.0	3 May Be to Fees	04/21/0 04/21/0 NOT V	001218 4-8000 VRIT	7-001	150.00

9. Election Campaign Financing \$5. FILE NOW!!! FEE IS \$150,00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Adde OFFICERS AND DIRECTORS 10. BILE MIDDLETON, JAMES F NAME 206 S E 41ST AVENUE STREET ADDRESS CITY-ST-ZIP OCALA, FL 00000, 34471 ST TITLE MIDDLETON, ANN H NAME 206 S E 41ST AVENUE STREET ADDRESS C07-57-78P 00000, 34471 OCALA, FL D KNOBLOCK, NANCY G. NAME STREET ADDRESS 2310 SE 12TH STREET CITY-ST-ZIP OCALA, FL 00000, 34471 រារា ទ NAME STREET ADDRESS CITY-ST-ZIP THELE NAME STREET ADDRESS CHY-SI-ZIP ona, peleokustina takarea xaaattotaingigamiinkiin maaatiniinhajiinmiingi pelokukunii MLE NAME STREET ADDRESS CITY-ST-ZIP

ONOTE. Registered Agent signship required

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes, if further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MIDDLETON, JAMES F

206 S E 41ST AVENUE OCALA, FL 34471

the obligations of registered agent.

SIGNATURE Signature, types is primad name of registered agent and too 9 applicable.

ブ みつ SAME TYPED ON PROVIDED NAME OF SIGNING OFFICER ON SURECTOR

2004 (352) 694-428,

F. MIDDLETON